

## **PUBLIC INFORMATION**

## **Customer Satisfaction Survey**



Department of Consumer Affairs, Public Information Unit, C/O Cashiering Unit P.O. Box 989004, West Sacramento, CA 95798

## Please fax or mail your completed survey to the Public Information Unit Phone: (916) 574-8150 Fax: (916) 574-8603 Email: public\_sales@dca.ca.gov Web: www.dca.ca.gov/public\_info

Contact Person: **Company Name:** Address: **Phone Number:** Date: Your request was processed by \_\_\_\_\_\_. If you have any questions, please contact us at (916) 574-8150. We appreciate the opportunity to serve you. To help us provide the best possible service, we encourage you to complete this Customer Satisfaction Survey and send it to the Public Information Unit using the fax number or mailing address listed above. Please check one box for each question below. 1. Your voicemail, email or fax was returned in a timely manner (1 business day).  $\Box$  5  $\Box$  4  $\Box$  3  $\square$  2  $\Box$  1 Strongly Disagree Strongly Agree Please explain: 2. Quotes and information were provided to you in a timely manner (by close of business). Strongly Agree  $\Box$  1 Strongly Disagree □ 5  $\Box$  4  $\square$  3  $\square$  2 Please explain: 3. If applicable, the Public Information staff you spoke with clearly explained ordering procedures and product information. Strongly Agree 

5  $\sqcap$  4  $\square$  3  $\square$  2  $\Box$  1 Strongly Disagree 4. If applicable, the Public Information staff you communicated with treated you in a courteous and professional manner. Strongly Agree 

5  $\sqcap$  4  $\Box$  3  $\square$  2  $\square$  1 Strongly Disagree Please explain: Additional Comments/Suggestions: